



News from around the country and the world

Hearing care for people
who are LGBTQ+.

Now is the time to invest
in earplugs.

Get Help with Your
Hearing: an Australian
Government campaign.



Now is the time to invest in earplugs.

1 billion teenagers and young adults worldwide are at risk of hearing loss due to unsafe listening habits.

Throughout the world, nearly **50%** of people aged 12–35 years of age – that’s **1.1 billion young people** – are at risk of hearing loss due to prolonged exposure to loud sounds, through listening to music on smartphones and audio players, or at music gigs and clubs.

Here in Australia, nearly **50% of young people** are exposed to unsafe levels of sound from the use of personal audio devices. And around **40%** of 12–35 year-olds are exposed to damaging sound levels at clubs and bars.

Practising safe listening is one of the simplest ways to prevent hearing loss that is caused by recreational exposure to loud sounds.

Love your music but protect your ears.

Earplugs can be a total lifesaver, especially if you know you are going to need them ahead of time, like if you’re headed to a concert.

How loud can concerts get? The answer is seriously loud. Sound is measured in decibels – a whisper sits at about 30 decibels, a lawn mower

is about 90 decibels, and live music can get up to a whopping 100 to 115 decibels.

Can that really damage my hearing? Definitely. Hearing damage can occur from prolonged or repeated exposure to any sound above 85 decibels. If you need to raise your voice above a noise to be heard, that noise is probably at or above 85 decibels.

If you attend multiple live gigs in a year without wearing earplugs to protect your ears, you could really be doing some damage, especially when you consider all the incidental loud noises we are exposed to during our daily lives.

There are many different earplugs on the market. Foam earplugs are usually very cheap and readily available at your local chemist. They are effective at blocking around 29 decibels of sound. They are not intended for long term use, but they are a great option if you don't have something better for attending a concert or

protecting yourself against other loud noises. But if you are in an industry where you are constantly exposed to sounds above 85 decibels, you might want to invest in some higher quality earplugs.

By [Eilish Gilligan](#) for [LifeHacker](#)



Deafness Forum's [executive](#) was in Perth for a series of events to meet and hear from members & friends in the West.

It was the opportunity to learn about the work being done by supporters; and of the issues that concern them such as citizen engagement in research, tackling a shortage in Auslan interpreters, and what some feel is the failure of the Closing the Gap program to improve the ear and hearing health of First Nations Peoples.



WA Parliamentarian [Martin Pritchard MLA](#) hosted a board luncheon at Parliament House. He is Convener of the Parliamentary Friends of Hard of Hearing, Deaf and Deafblind people.

There were visits to [Access Plus](#), [Shenton College Deaf Education Centre](#), the [Earbus Foundation](#), [Telethon Speech and Hearing](#), and [Ear Science Institute Australia](#).

At Saturday's community forum, the audience heard from Jane Miller from [Connecting Community for Kids](#), Paul Higginbotham from Earbus, [Prof. Mel Ferguson](#) from Curtin University, University of Western Australia's [Dayse Tavora](#) and [Andre Wedekind](#), and [David McAlpine](#) from Macquarie University Hearing.



Deafness Forum was privileged to be a guest at a dinner on Monday to mark the 10th anniversary of the [Earbus Foundation](#) of WA. In the photo, Earbus CEO Lara Shur and executive director Paul Higginbotham.

Get Help with Your Hearing.



Hearing loss is common among Australians, with 1 in 6 people experiencing some form of difficulty hearing. Left untreated, hearing loss can affect mental and physical health and have a big impact on everyday life.

That's why it's important to think about hearing in the same way you think about other aspects of your health.

Many Australians with hearing loss do not seek treatment but help is available. Having a hearing test can help to detect the early signs of hearing loss, so you can keep your hearing healthy for longer. Hearing aids are not the only treatment for hearing loss. Following a hearing check, a range of management options may be discussed including communication strategies, assistive listening devices and phone apps.

If you are concerned about your hearing, or the hearing of someone you love, book a hearing check today. Talk to your health professional or visit health.gov.au/hearing for more information.

Access resources [here](#)

- Fact sheets, posters, and videos
- Infographics
 - testing pathways for hearing loss
 - ways to manage hearing loss
- Information on managing hearing loss
- Talking to people with hearing loss
- Communicating when you have hearing loss
- Information for health care providers.

Read about

- [Ways to prevent & manage hearing loss](#)
- [Support people with hearing loss](#)

Book a hearing check

If you are concerned about your hearing or are experiencing hearing loss, a test by a [hearing care professional](#) can help determine the type of hearing loss and how much it has progressed.

Get Help With Your Hearing

is a national awareness campaign created by the Australian Government to encourage people with untreated or developing hearing loss (aged 50–70 years) to proactively manage their hearing health. For more information visit the [website](#).

Hearing over distance or in reverberant places is challenging.

The effect of distance from a sound source is intensified for hearing aid users. Think of input to the hearing aid microphone as an ever-expanding funnel. As one moves further and further away from the sound source, the “funnel” in effect, becomes wider and wider and gathers in more and more sounds, wanted and unwanted sounds, and mixes them all together – making understanding increasingly difficult.

Most hearing aid users do best where wanted signals originate less than 2-3 meters from their ears and only in places where it is quieter, reverberation is minimal, and the speakers can be easily seen to aid in lipreading. But what about the – often acoustically unfriendly – public environments we all move around in on a daily basis?

Can something be done to improve communication, to ensure hearing loss is no longer a barrier, and people with hearing loss are not left behind? If wheelchair ramps help people with mobility challenges, is there an equivalent for people with hearing loss and hearing aids that can help them hear with greater ease and put them “on par” with normal hearing folks? The answer is yes! Hearing loops, an assistive technology can be of great benefit.

When a person is within the field of a hearing loop, they switch their hearing aid or cochlear implant to the T-coil or telecoil setting: the sound from the PA system is broadcast directly and wirelessly into their hearing aids. With hearing loops, there is no need for users to pick up a generic receiver from a service desk. In a hearing loop, the hearing aid is the receiver.

The Hearing Loss Association of America raises awareness of the benefits of hearing loops. It advocates for their installation in public venues through their [Get in the Hearing Loop initiative](#).



Having easy access to hearing loop locations will help people with hearing loss find communication access when they venture out in the world.

If you have benefited from a hearing loop, let the facility know. Let’s make everyone aware that hearing loops are essential to providing hearing accessibility because they ensure hearing aid users can hear and participate with ease, just like everyone else!

By Juliëtte Sterkens, writing for [AccessiBe](#). Dr Sterkens is a hearing loop advisor to the Hearing Loss Association of America. In this capacity, she advocates for the inclusion of telecoils in hearing aids and cochlear implants, the installation of hearing loop systems that meet the international hearing loop standard, as well as another telecoil compatible assistive technology, to permit universal hearing access for consumers with hearing loss the world over.

Bluetooth technology does not directly connect hearing aids with hearing loops.

A new Bluetooth protocol has been released but it will be some years before most hearing aids are fitted with Bluetooth LE, and many more years before all hearing aids currently in use are replaced with hearing aids with Bluetooth LE.

The [International Deafness Symbol](#) shows that a hearing loop has been installed in a public place.

Hear the cheers.



By [Bowls Australia](#).

If you enjoy playing sports and socialising at the local Bowls Club, hearing difficulties can detract from the overall experience, leading to frustration and isolation.

By taking action to address hearing difficulties, people can continue to stay connected to the people, sounds and activities that matter most.

Hearing health provider Audika has partnered with Bowls Australia to promote the importance of healthy hearing among bowlers, their loved ones, and the wider community. Audika and Bowls Australia work together to provide access to quality hearing health care to the Bowls member network. If they host an Audika Screening Day at their Bowls event, \$250 will be donated to the club. Audika will provide a hearing care expert to conduct free hearing checks to anyone 26 years and over. [Apply here](#).

Audika developed a free, downloadable [Guide to Hearing Health](#), which provides information and resources on how to maintain healthy hearing, as well as advice on what to do if you (or a loved one) are experiencing hearing difficulties.

With over 3.6 million Australians currently living with some form of hearing loss, partnerships like this are crucial to ensure more people hear better.

Common insecticides may affect hearing.

Pyrethroids are commonly-used but we know little about their effect on the auditory system.

Although previous studies have reported the relationship between pyrethroids and neurotoxicity, little is known about the effect of pyrethroid exposure on the auditory system among the general population. A recent study in the U.S. shows a possible link to changes to hearing among younger people.

The study found that pyrethroid insecticides were prone to be more toxic to auditory systems in younger adults than in older ones. [Plos One](#)

Aged Care Workforce online training tool.



The Department of Health and Aged Care has created a hearing health training module for people working in aged care settings.

[Hearing Health Introductory and Refresher Module](#) is one of a series of free online learning opportunities to support aged care workers with foundational knowledge of key concepts in aged care.

This new module is part of the [Equip Aged Care Learning Packages](#). Deafness Forum also has free Training resources for hearing assistance in aged care & hospitals - [click here](#).

Interventions for expressive language.

Effects of early intervention frequency on expressive vocabulary growth rates of very young children: How much is enough?

[Amanda M. Rudge](#), [Betsy Moog Brooks](#) and [Heather Grantham](#) for [AshaWire](#).

A recent study explored expressive vocabulary growth rates of children who have hearing difficulties or are profoundly deaf during critical periods of brain development – from birth to 3 years – as well as the factors that influence vocabulary growth in these early years of development. Of primary interest was the effect of intervention frequency on expressive vocabulary growth.

Expressive language is the use of words, sentences, gestures and writing to convey meaning and messages to others. Expressive language skills include being able to label objects in the environment, describe actions and events, put words together in sentences, use grammar correctly (e.g. “I had a drink” not “Me dranked”), retell a story, answer questions and write a short story. Expressive language enables children to be able to express their wants and needs, thoughts and ideas, argue a point of view, develop their use of language in writing and engage in successful interactions with others.

Results of the study indicated average growth rates of 5.21 new words expressed per week. Increased intervention hours prior to age 3 years was significantly associated with higher degrees of expressive vocabulary growth.

The conclusion: findings of this study suggest that greater intervention hours received before age 3 years are associated with higher degrees of expressive vocabulary growth for children who have hearing difficulties or are profoundly deaf.

New iPhone feature can clone your voice.



Apple has unveiled a new feature that allows iPhone, iPad and Mac users to make a digital clone of their voice.

By [Alex Lee](#) for [The Independent](#).

The Personal Voice feature is aimed at “helping those who are at risk of losing their voice, such as people with an amyotrophic lateral sclerosis diagnosis or other neurological conditions.”

The Independent newspaper got a first look at the new feature in action, and the Personal Voice sounded remarkably similar to the user’s actual voice, albeit with a slightly robotic, synthesised tone.

It can be trained in 15 minutes simply by reading a bunch of randomly generated text prompts, and uses on-device machine learning to ensure your data is kept private and secure.

Personal Voice will let users type what they want to say and have it spoken out loud, during in-person conversations, as well as with phone and FaceTime calls. The feature is said to work with all accents and dialects.

It wasn’t stated, but the feature will be of interest to people who are non-verbal. They won’t be able to clone their own voice but it may not be so different from using the voice of a sign language interpreter.



Hearing care for people who are LGBTQ+

The past decade has provided increased awareness and understanding of the significant health disparities experienced by the LGBTQ+ community. The past 10 years have also brought around a linguistic and cultural revolution and a subsequent shift in the language used by members of the LGBTQ+ community.

Words and actions are powerful and important and using mindful practice will create a welcome environment to LGBTQ+ patients, families, staff, and visitors. Health care workers including audiologists have been asked to think deeply on how they engage with all people to create safe environments.

Studies of the health disparities experienced by the LGBTQ+ community within audiology are lacking and therefore not well understood. However, health disparities for LGBTQ+ people extend to the signing Deaf community. Research has found greater health disparities among Deaf LGBTQ+ people compared to Deaf non-LGBTQ+ people for physical and mental health.

LGBTQ+ patients are more inclined to seek medical care when they perceive the provider as accepting of the LGBTQ+ community. One study found that LGBTQ+ patients seek out providers that advertise being LGBTQ+ friendly. Patients

feel more comfortable sharing confidential information when there is a perception of trust and that the provider will understand the complexity of the situation.

Social isolation is more common in LGBTQ+ older adults and in adults with hearing loss, suggesting that LGBTQ+ older adults with hearing loss may be particularly susceptible to social isolation because of the intersectional experiences of marginalisation between their hearing loss and their LGBTQ+ identity. Audiologists may find that because of these intrapersonal factors, LGBTQ+ patients have less social support than other populations.

Audiologists can be sources of interpersonal stigma for their patients. A survey of LGBTQ+ individuals receiving services from communication sciences and disorders health care providers found that 79% of LGBTQ+ patients felt that their identity was a barrier to receiving services, and only 4% chose to share their identity with their communication disorders health care provider. Little education about LGBTQ+ identities and the best practices for care of these populations is present in audiology or other health care courses, which leads to health care providers like audiologists often knowing little about the unique challenges that LGBTQ+ people experience. This lack of knowledge contributes to health disparities among LGBTQ+ people, causes health care providers to be a source of stigma and discrimination for LGBTQ+ patients and colleagues, and reduces health care use by

LGBTQ+ adults. Unconscious bias may negatively influence patient-provider relationships even with health care providers that do not wish to treat their LGBTQ+ patients differently. People who experience negative interactions with health care providers are more likely to leave a practice and not return. Cultural humility and increased training on LGBTQ+ issues can reduce bias and prejudice among health care providers.

Displaying LGBTQ+ pride flags or posters can indicate to patients that it is a welcoming practice without needing to indicate this individually to each patient. Signs like this allow the patient to recognise that they are in a safe place to come out. Another strategy to provide access to patients is to convert gendered restrooms into gender-neutral restrooms.

An important strategy to ensure that a practice is more welcoming is to use inclusive language on marketing materials, in case history forms, and in records. Rather than asking only for legal name, the clinic could add an additional line asking what name the patient goes by. This helps more than just LGBTQ+ patients as it allows for patients to indicate if they would prefer to go by a middle name or nickname and can make rapport building with these patients much easier.

Being an inclusive provider is recognising when a mistake has been made, making a short apology, and correcting the error. Even the members of the LGBTQ+ community make mistakes when meeting new people or as they learn more.

All people, regardless of their identity, deserve equitable access to quality health care. Audiologists are bound by ethical responsibility to create a safe place for patients to feel welcome and share personal information.

From 'Providing Mindful and Informed Health Care for Patients Who Are LGBTQ+: [Perspectives for Clinical Audiology](#)' by [Shade Avery Kirjava](#), [Douglas P. Sladen](#) and [J. Riley DeBacker](#)

There are surprising parallels in the narratives of being Deaf and being queer.

Just as queer people are for the most part raised by straight-identifying parents, most profoundly deaf children are born to hearing parents. These parents are frequently unable to provide a framework for understanding the experiences of discrimination that their children will encounter in their lives. Consequently, some of these children will grow up to seek shared experience later in life, joining communities that become sources of culture, connection, identity, and pride.

However, as both signing Deaf and queer communities stand outside able-bodied and straight standards of acceptability, both communities have to fight against politics that push them towards invisibility and conformance as opposed to visible identity. Both communities face barriers in accessing equitable health care.

Zoée Montpetit, founder of Queer ASL in Vancouver and the president of the [British Columbia Rainbow Alliance of the Deaf](#), thinks that these parallels may be why queer people are drawn to her sign language classes.

"Before I got involved in the hearing queer community," says Montpetit "I struggled to expand my signing community.

"But queer people understand how it is to be marginalised. Once they start to learn about sign language and Deaf culture, I think they start to recognise aspects that they relate to."

Montpetit says that her queer and trans students are motivated by a sense of solidarity with Deaf communities.

"There is a real sense of kinship, a desire to increase access, and an ability to understand how hearing people can oppress Deaf people, just as straight people can oppress queer people."

Read more from [How The Deaf And Queer Communities Are Tackling Oppression Together](#).



Almost everyone has experienced the challenge of understanding someone talk in a noisy situation like a crowded restaurant, but there are many people who struggle far more than most to understand speech in noisy environments.

Having significant difficulty with speech in a noisy place is one of the earliest indications of a hearing loss and a good reason to get a hearing test.

Unfortunately, there are many people who do get their hearing tested at a hearing healthcare clinic hoping to receive help for their difficulty with speech in noise only to be told by the clinician that they have “normal” hearing because the standard hearing test didn’t reveal any hearing loss.

This condition is termed “hidden hearing loss”, coined by Macquarie University [Professor David McAlpine](#), and refers to the condition where someone has speech-understanding difficulties similar to someone with hearing loss but without any clinical evidence that they have an actual hearing loss — their hearing problems are “hidden”.

Australia’s National Acoustic Laboratories has conducted research into this issue, which is believed to affect millions of Australians.

NAL researchers have investigated the cause of hidden hearing loss, tested methods to “unhide” it, and developed innovative technology solutions to improve understanding speech in noise.

Apple AirPods Pro, for example, have been shown by NAL researchers to help people with hidden hearing loss, although many people are uncomfortable wearing these devices in social situations.

Technology developed at NAL was also licensed by a California tech company for use in an iPhone accessory to help with speech in noise understanding.

NAL Director Dr Brent Edwards said, “The number of people in Australia with hidden hearing loss quite likely rivals the number of Australians who have an actual hearing loss, yet there are few if any solutions provided for this population.”

“We are working with clinicians at Hearing Australia to help “unhide” this problem and develop solutions to improve their speech understanding in noisy situations, with the potential to improve the lives of millions of people who are being challenged to fully engage in noisy social situations.”

Other researchers are investigating potential treatments for hidden hearing loss, such as drugs that can promote the growth of new synapses or enhance the function of existing ones. Some studies have also looked at whether certain types of auditory training or brain stimulation techniques can improve the ability of people with hidden hearing loss to better understand speech in noisy environments.

Hearing loss is also called an invisible disability because you can't tell someone has hearing loss by looking at them.

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Read Our Lips Australia was created with funding from the Commonwealth Department of Social Security and NDIS.



Do captions help people in face to face meetings?

Try this: sit in a meeting with 10 people around the table. Put your fingers in your ears, but not so deep as to hurt your eardrums. Now, what was that last speaker going on about?

Captions in face-to-face meetings are so important to so many people.

Accessibility: Captions provide accessibility for people with hearing difficulty, allowing them to fully participate in the meeting and understand the conversations taking place.

Inclusion: By providing captions, face-to-face meetings become more inclusive and equitable. Everyone, regardless of their hearing abilities, can actively engage in the meeting.

Compliance with Human Rights and Disability Discrimination laws: People have a legal right to the supports that help them be included in conversations with them and about them.

Accommodation for different learning styles: Captions accommodate different learning styles and preferences. Some find it easier to process information when it is in written form.

Clarity and comprehension: Captions make it easier to get a clear understanding of a topic being discussed. They are particularly helpful where there is background noise, multiple speakers, or individuals with different accents.

Multilingual support: Captions can provide real-time translations or transcriptions for people who may not be fluent in the primary language of the meeting.

Retention and engagement: Captions enhance engagement and information retention by providing a visual aid alongside the spoken words. Visual learners can benefit from both the auditory and visual aspects.

Note-taking and reference: Captions can serve as a valuable reference tool during and after the meeting. Participants can review the captions to clarify specific points, take notes, or refer back to the content discussed during the meeting.

Captions play a crucial role in fostering inclusivity, accessibility, and effective communication in face-to-face meetings.

People who need captions are legally entitled to them being provided. And the same goes for Hearing Loops and interpreters. If they are not provided when you ask, your human rights have been ignored according to the [United Nations Convention on the Rights of Persons with Disabilities](#), of which Australia is a signatory.

Woes of a hearing-impaired civil engineering graduate turned cleaner.



He is hard of hearing, however, despite his disability, 30-year-old Fred Addo strived hard to pursue higher education after a philanthropist offered him a full scholarship to further his education to the tertiary level.

The term hard of hearing is used to describe people who have some degree of hearing loss but still have some residual hearing. They may have difficulty understanding speech or hearing sounds, especially in noisy environments or when people speak softly. The degree of hearing loss can vary widely and may be caused by a range of factors such as age, genetic factors, exposure to loud noise, and medical conditions.

Now a graduate of the Accra Technical University with a High National Diploma in Civil Engineering, Fred is currently working as a cleaner at a hotel. After his cleaning duties in the morning, he continues to do mobile banking for a microfinance firm during the day.

When the [Ghanaian Times](#) caught up with the young man to have an in-depth conversation about his trials, he revealed that he had tried many times since his graduation in 2018 to apply for jobs but failed to secure one due to his disability.

He said he had been told by many people on different occasions that but for his hearing impairment, they could have given him the job he sought, and “this makes me very sad. It has affected my confidence, so at the moment I do not feel comfortable when I am in the midst of people. I always feel dejected and worried”.

CAUSE OF FRED’S PREDICAMENT

Fred’s hearing problems, he said, started when he was eight years old after his father, an alcoholic, slapped him several times one day.

He stated that he had always suffered physical abuse from his father, who always attacked him and beat him mercilessly without provocation.

“My father always assaulted me as a child, any time he returned home drunk. We were never happy and safe at home when he was around, and because our mother was helpless, she also could not offer us enough protection from our abusive father. My father passed away in 2014,” he added.

He stated that his mother took him to the hospital after he started feeling severe pains in his right ear and difficulty hearing. He was later referred to the Korle-Bu Teaching Hospital where he received treatment for his ear problem.

Explaining, he indicated that after the initially prescribed drugs that he was put on by the doctor, his mother could not afford to take him back to the hospital again due to financial issues and rather took him to a prayer camp upon advice from his aunties (mother's sisters).

"These so-called men of God worsened my plight as they poured different kinds of oil into my ears. After my encounter with them, my ear pain got worse, and I could no longer hear any sound with my right ear again. As time went by, my left ear also started hurting, and gradually hearing became difficult. I can only hear loud sounds, and this has affected my communication to a large extent," he lamented.

Fred indicated that he believed employers were rejecting him because of his hearing disability, and the lack of adequate support and accommodations for hearing impaired individuals in Ghana had further made his case worse.

He lamented that he had come to a point where hope was almost lost due to the lack of opportunities available for his personal and professional growth as a qualified civil engineer.

"My condition does not make me incompetent; Ghana should please allow me to show this country and the world at large that my only problem is that I am hard of hearing; I can work and perform well. I need support, so someone should give me the opportunity to show the world what I can contribute to its growth."

Research has shown that people who are hard of hearing may benefit from various forms of assistive technology, such as hearing aids, cochlear implants, or other devices that help them to better hear and understand sounds; however, due to financial constraints, Fred is unable to afford any of these and is therefore calling on the public to help him get a hearing aid at least.

SUICIDE ATTEMPT

Fred sadly revealed to the *Ghanaian Times* that he once attempted to take his life. When asked whether he still had suicidal thoughts, he

responded that he still hinged on some faith that his story could turn around for the better.

He also disclosed that a German philanthropist whom he had now lost contact with got him a hearing aid when he was in senior high school (SHS), but the device got damaged after using it for some years.

Raising awareness about hearing impairment, its impact, and how to support individuals with hearing disabilities through community education programs, social media campaigns, and awareness-raising events would go a long way toward reducing stigmatisation and promoting inclusion at all levels. Encouraging and supporting employers to hire individuals with hearing impairments by providing training, accommodations, and resources to support their inclusion in the workforce is necessary and possible.

By working together, a more inclusive and supportive environment for individuals with hearing impairments in Ghana could be created.

By Raissa Sambou for the [Ghanaian Times](#).



Know someone who deserves their own copy of One in Six? Let us know:

hello@deafnessforum.org.au

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